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44987 759 HARRITY SNYE 11350 Random Hill SUITE 600		Certificate of Malling or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEB address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
FAIRFAX, VA 22030							(Depositor's name)
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APPLICATION NO.	FILING DATE	FIRST NAMED INVE		INVENTOR	ATTORNEY	DOCKET NO.	CONFIRMATION NO.
09/955,122 FITLE OF INVENTION: CO	09/19/2001 ONTEXT-SWITCHED MU	LTI-STREAM PE	Rami I PELINED RE		0023	-0041	8433
APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE	TOTALF	EE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$0	\$1	400	07/13/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS			
PARK, JUNG H 2				370-394000			
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.      "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1Harrity Snyder LLP				
	RESIDENCE DATA TO Base an assignee is identified be 37 CFR 3.11. Completion of			u 2, ,	ignee is identifie	d below, the d	ocument has been filed for
(A) NAME OF ASSIGNE	NCE: (CITY and STATE O	E: (CITY and STATE OR COUNTRY)					
Juniper Networks, Inc. Sunnyvale, California							
Please check the appropriate	assignee category or categor	ies (will not be pri	nted on the pa	atent): 🗆 Individual 🕸	Corporation or o	ther private gro	oup entity Government
A. The following fee(s) are enclosed:    Size Fee			b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number				
a. Applicant claims SM	from status indicated above	17 CFR 1.27.	☐ b. Applica	ant is no longer claiming SM	IALL ENTITY st	atus. See 37 CI	FR 1.27(g)(2).
The Director of the USPTO is NOTE: The Issue Fee and Punterest as shown by the recon	s requested to apply the issu blication Fee (if required) w ds of the United States Pate	e ree and Publicate ill not be accepted nt and Trademark (	ion ree (if any from anyone Office.	y) or to re-apply any previous other than the applicant; a r	usly paid issue fe egistered attorney	e to the applica or agent; or the	tion identified above. se assignee or other party in
Authorized Signature	/Brian E.	Ledell/		Date	June 14	, 2006	
Typed or printed name Brian E. Ledell			Date 42,784 Registration No.				
his collection of information n application. Confidentialit ubmitting the completed app	is required by 37 CFR 1.31 y is governed by 35 U.S.C. plication form to the USPTO	1. The information 122 and 37 CFR 1 ). Time will vary of	is required to .14. This coll- depending up-	o obtain or retain a benefit b ection is estimated to take 1 on the individual case. Any	y the public whic 2 minutes to con comments on th	h is to file (and plete, includin amount of tin	by the USPTO to process) g gathering, preparing, and ne you require to complete

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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